Utah Department of Environmental Quality Division of Drinking Water

Monitoring Schedule

Run Date:

08/04/2011 12:34 pm

PWS ID: UTAH21056 Name: FREMONT INDIAN SAM STOWE CAMP

Legal Contact HANOVER, BOB Rating: Approved

BOB HANOVER Rating Date: 06/04/2009

Address: PO BOX 43 Activity Status: Active

ANTIMONY, UT 84712

Phone Number: 435-527-4631

City Served (Area):

County: SEVIER COUNTY

Gal/Day Gal/Min

System Type: Non-community

Activity Status Cd: Active

Population: 30

Last Inv Update: 12/14/2010

Last Snty Srv Dt:

Surveyor:

Total Dsgn Cap:

Total Emerg Cap:

Oper Period: 4/15 to 10/15

Total Coliform Rule Monitoring

Sample Count	Sample Type	Sample Frequency	Effective Begin Date	Effective Seasonal Se End Date Start		Seasonal End	Analyte Name	
1	Routine	Quarterly	10/01/2009		4/15	10/15	COLIFORM (TCR)	

Additional Monitoring Requirements

(The Sample Label is not correct for Disinfection Byproducts, TOC, TOC Alkalinity, and any triggered groundwater samples)

Facility □□IIFacility Name Analyte Name	Sample Count	Sample Type	Samp Freque		Next Sample Between
WS001 SAM STOWE CAMP WELL		Activity Sta	atus: A	Sample Label: UTAH2105	6 WS001 WS001
NITRATE	1	Routine	Year	12/06/2010	01/01/2011-12/31/2011
SULFATE	1	Routine	3Y	12/06/2010	01/01/2011-12/31/2013

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